

## Request for Approval for Consultant Quality Assurance Materials Testing\*

Project Number/County: \_\_\_\_\_

GDOT Contract ID Number/Proposed Let Date: \_\_\_\_\_

Project Description: \_\_\_\_\_

Local Government Responsible for Letting Project: \_\_\_\_\_

Local Govt. Project Manager Contact Name &amp; Number: \_\_\_\_\_

\*Contact the State Materials and Research Engineer if a Bridge or other major structure is involved.

***Certified Technicians to be responsible for testing on the project and Quantities associated with main items of work:***

### 1) Hot Mix Asphalt- Note estimated tons

Mix Type	Estimated Tons
9.5 mm	
12.5 mm	
19 mm	
25 mm	
Other:	

Request GDOT to perform Verification ☐ Check box and notify GDOT of start of work

If, no, then list GDOT Certified Quality Control Technician(s) who will be performing verification:

GDOT QCT Certification Number	Name/ Employer

### 2) Roadway Testing Technicians (RTT)- are required to perform field density testing on embankment, pipe backfill, subgrade and all asphalt layers.

List GDOT Certified Roadway Testing technician(s) who will be performing testing:

GDOT RTT Certification Number	Name/ Employer

### 3) Concrete – Note estimated cubic yards.

Class Type	Estimated Cubic Yards
B	
A	
Other:	

List GDOT Certified Concrete technician(s) who will be performing concrete testing &amp; certification number:

GDOT Concrete Certification Number	Name/ Employer

Attach additional sheets as necessary.

APPROVED: \_\_\_\_\_

State Materials and Research Engineer